

TAKE CHARGE OF YOUR HEALTH; Lower Your Out-of-Pocket Costs

We encourage you to take charge of your health and avail yourself of ways of lowering your out-of-pocket costs:

- Work with your Primary Care Provider (PCP) to navigate the health care system.
- Seek care from Tier 1 and Tier 2 specialists. Over 150
 million de-identified claims have been analyzed for differences
 in how physicians perform on nationally recognized measures
 of quality and/or cost efficiency. You pay the lowest copay for
 the highest-performing doctors:
 - *** Tier 1 (excellent)
 - ★★ Tier 2 (good)
 - ★ Tier 3 (standard)
- If you are in a tiered hospital plan and have a planned hospital admission, talk with your doctor about whether a **Tier 1** hospital would make sense.

- Use **urgent care facilities and retail minute clinics** instead of the emergency room for urgent (non-emergency) care.
- Make copies and bring the prescription drug formulary from your plan's website with you to all doctor visits.
- Use your health plan's online cost comparison tool to shop for health care services in advance. Some GIC plans even give you a check when you use this tool and select a lowerpriced provider.
- Consider enrolling in a Limited Network Plan to save money on your monthly premium.
- Read about ways to take charge of your health; the GIC's website has a wealth of articles and links to additional resources: mass.gov/gic/yourhealth.
- Eat healthy, exercise regularly, don't smoke, and find ways to de-stress.

For more information about specific plan benefits, participating doctors, hospitals and other providers, contact the plan.

HEALTH INSURANCE			
Fallon Health Direct Care Select Care	1.866.344.4442	fallonhealth.org/gic	
Health New England	1.800.842.4464	hne.com/gic	
Neighborhood Health Plan NHP Prime	1.866.567.9175	nhp.org/gic	
UniCare State Indemnity Plan/ Basic	1.800.442.9300	unicarestateplan.com	
Prescription Drugs (CVS Caremark)	1.877.876.7214	caremark.com/gic	
Mental Health/Substance Abuse and EAP (Beacon Health Options)	1.855.750.8980	beaconhealthoptions.com/gic	

PARTICIPATING TOWNS AND SCHOOL DISTRICTS



According to Massachusetts Law Chapter 32B, the following cities, towns and school districts participate in the GIC's Retired Municipal Teacher (RMT) benefit program.

Amesbury Martha's Vineyard Regional SD Rockport
Barnstable Milton Rutland
Billerica Montague Salisbury

Blackstone Valley Regional SD Narragansett Regional SD Shawsheen Regional SD

BourneNewburySpencerBraintreeNorth AdamsStoughton

Bridgewater North Attleboro Upper Cape Cod Regional SD

Dedham North Middlesex Regional SD Wareham

Dennis Norwell West Bridgewater
Eastham Paxton West Springfield

Everett Pioneer Valley Regional SD Westfield

Granby Plainville Whitman-Hanson SD

Greater Lawrence Regional SD Quabbin Regional SD Wilbraham
Harvard Rehoboth Woburn

Holyoke Revere Hudson Rockland



Benefits

Connection

2016-2017

GIC HEALTH PLANS Benefits At-A-Glance

NON-MEDICARE

RETIRED MUNICIPAL TEACHERS (RMTs)
AND ELDERLY GOVERNMENTAL RETIREES (EGRs)





ANNUAL ENROLLMENT: April 6 – May 4, 2016

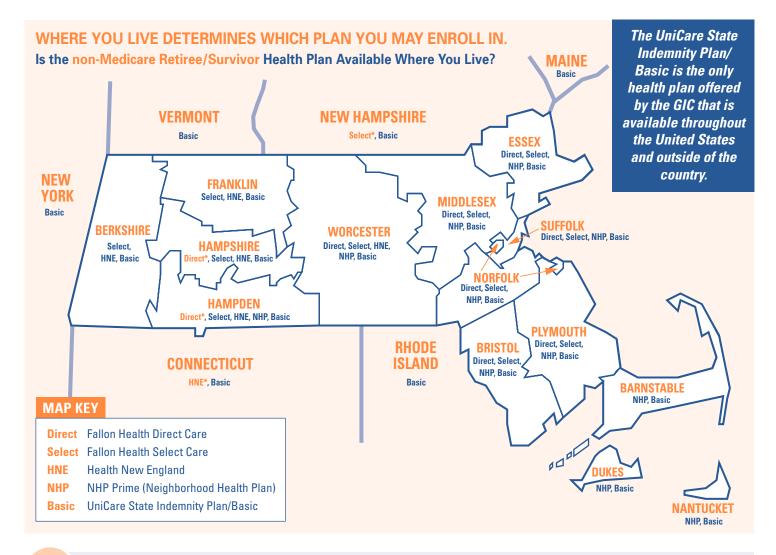
- Where you live determines which plan(s) you may enroll in.
 See the locator map below to see which health plans are available in your area.
- See your *GIC Benefit Decision Guide* for additional eligibility details, benefit information, rates, and factors to consider when choosing a health plan.
- Contact the health plans you are considering to find out:
 - Whether your doctors and hospitals are in the network (Note: Be sure to specify the health plan's full name, such as "Fallon Health Direct" or "Fallon Health Select," not just "Fallon Health."); and
 - Which copay tiers your specialists and hospitals are in.
- See the GIC's website (mass.gov/gic) for additional information.

Keep in mind that even if your doctor or hospital leaves your health plan's network during the year, you **must** stay in the plan until the next annual enrollment. In the meantime, your health plan will help you find another provider.

MARK THE DATE!

See our website for RMT forms and answers to frequently asked questions (mass.gov/gic/RMTs)

- GIC Retired Municipal Teachers (RMTs) retiring in June 2016
 have until June 15, 2016 to select their coverage, which becomes
 effective September 1, 2016. Return enrollment forms and required
 documentation to your benefits office.
- Current RMTs and EGRs: Completed forms are due to the GIC no later than Wednesday, May 4, for changes effective July 1, 2016.





* Not every city and town is covered in this county or state; contact the plan to find out if you live in the service area. The plan also has a limited network of providers in this county or state; contact the plan to find out which doctors and hospitals participate in the plan.

BENEFITS AT-A-GLANCE: copays for non-medicare GIC RMTs (Retired Municipal Teacher

This chart is a comparative overview of GIC plan benefits. See the corresponding overview information for each plan for more information. With the exc see the plan handbook or contact the individual plan. For details on UniCare Indemnity Plan/Basic without CIC, contact the plan.

HEALTH PLAN	FALLON HEALTH DIRECT CARE	FALLON HEALTH SELECT CARE
PLAN TYPE	НМО	НМО
PCP Designation Required	Yes	Yes
PCP Referral to Specialist Required	Yes	Yes
Out-of-pocket Maximum Individual coverage	\$5,000	\$5,000
Family coverage	\$10,000	\$10,000
Fiscal Year Deductible Individual Two-person family Three- or more person family	\$300 \$600 \$900	\$300 \$600 \$900
Primary Care Provider Office Visit	\$15 per visit	\$20 per visit
Preventive Services	Most covered at 100% – no copay	Most covered at 100% – no copay
Specialist Physician Office Visit ★★★ Tier 1 (excellent) ★★ Tier 2 (good) ★ Tier 3 (standard)	\$30 per visit \$60 per visit \$90 per visit	\$30 per visit \$60 per visit \$90 per visit
Retail Clinic and <i>Urgent Care Center</i>	\$15 per visit	\$20 per visit
Outpatient Mental Health and Substance Abuse Care	\$15 per visit	\$20 per visit
Emergency Room Care	\$100 per visit (waived if admitted)	\$100 per visit (waived if admitted)
Inpatient Hospital Care – Medical		Maximum one copay per person pe
Tier 1 Tier 2 Tier 3	\$275 per admission with no tiering	\$275 per admission \$500 per admission \$1,500 per admission
Outpatient Surgery		Maximum one copay per ca
	\$250 per occurrence	\$250 per occurrence
High-Tech Imaging (e.g., MRI, CT and PET scans)	\$100 per scan	Ma \$100 per scan
Prescription Drug Retail: up to a 30-day supply Tier 1 Tier 2 Tier 3	\$10 \$30 \$65	\$10 \$30 \$65
Mail Order Maintenance Drugs: up to a 90-day supply Tier 1 Tier 2 Tier 3	\$25 \$75 \$165	\$25 \$75 \$165

rs not in the Municipal Health-Only Program) and EGRs (Elderly Governmental Retirees)



eption of emergency care, there are no out-of-network benefits for the GIC's HMOs. For providers, benefit details, exclusions, and limitations,

HEALTH NEW ENGLAND	NHP PRIME (Neighborhood Health Plan)	UNICARE STATE INDEMNITY PLAN/BASIC with CIC (Comprehensive)		
НМО	HM0	INDEMNITY		
Yes	Yes	No		
No	Yes	No		
\$5,000 \$10,000	\$5,000 \$10,000	\$4,000 medical & mental health/\$1,500 Rx \$8,000 medical & mental health/\$3,000 Rx		
\$300 \$600 \$900	\$300 \$600 \$900	\$300 \$600 \$900		
\$20 per visit	\$20 per visit	\$20 per visit		
Most covered at 100% — no copay	Most covered at 100% – no copay	Most covered at 100% – no copay		
\$30 per visit \$60 per visit \$90 per visit	\$30 per visit \$60 per visit \$90 per visit	\$30 per visit \$60 per visit \$90 per visit		
\$20 per visit	\$20 per visit	\$20 per visit		
\$20 per visit	\$20 per visit	\$20 per visit		
\$100 per visit (waived if admitted)	\$100 per visit (waived if admitted)	\$100 per visit (waived if admitted)		
calendar year quarter. Waived if readmitted within 30 days in the same calendar year.				
\$275 per admission with no tiering	\$275 per admission with no tiering	\$275 per admission with no tiering		
lendar quarter or four per year, depending on plan. Contact the plan for details.				
\$250 per occurrence	\$250 per occurrence	\$250 per occurrence		
ximum one copay per day. Contact the plan for details.				
\$100 per scan	\$100 per scan	\$100 per scan		
\$10 \$30 \$65	\$10 \$30 \$65	\$10 \$30 \$65		
\$25 \$75 \$165	\$25 \$75 \$165	\$25 \$75 \$165		

Out-of-pocket maximums apply to medical and mental health benefits across all health plans. Prescription drug (Rx) benefits are included in the out-of-pocket maximums in all health plans except UniCare, which has separate in-network out-of-pocket maximums for medical/mental health and prescription drugs.